Please	type	a plus	sign	(+)	inside	this b	юх	\rightarrow	+	l
--------	------	--------	------	-----	--------	--------	----	---------------	---	---

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0332
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR **DESIGN** PATENT APPLICATION

(37 CFR 1.63)

 □ Declaration OR Submitted with Initial

Filing

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Nun	nber	1322/8
First Named Inventor	7	Sprague, David M.
COMPLE	ETE IF	KNOWN
Application Number		
Filing Date	Here	with
Group Art Unit		
Examiner Name .		

As a below named inven	itor, I hereby declare that:								
My residence, post office	address, and citizenship are	as stated below next to my	name.						
	first and sole inventor (if only f the subject matter which is								
See Attachment	1								
the specification of which (Title of the Invention) is attached hereto OR									
was filed on (MM/D	D/YYYY)	as United	d States Applicat	tion Number or Po	CT International				
Application Number	and wa	as amended on (MM/DD/YY	YY)		(if applicable).				
I hereby state that I have re amended by any amendme	eviewed and understand the eart specifically referred to abo	contents of the above identi- ove.	fied specification	n, including the cla	ims, as				
, ,	disclose information which is		defined in 37 CF	R 1.56.					
certificate, or 356(a) of any America, listed below and ha	ity benefits under 35 U.S.C. PCT international application ave also identified below, by application having a filing date	on which designated at lea	st one country on application for	other than the Up or patent or invent	nited States of				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	py Attached? NO				
	ation numbers are listed on a				0:				
	inder 35 U.S.C. 119(e) of any	·	application(s) list	ed below.	· · · · · · · · · · · · · · · · · · ·				
Application Number 60/127,889	$\frac{\text{(s)} \qquad \text{Filing Date}}{04/5/99}$	e (MM/DD/YYYY)		onal provisional					
60/137,988	06/7/99		supple	ers are listed on emental priority BB/02B attached	data sheet				

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box ->

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

- Utility or Design Patent Application

United States United States information w	of Ameri or PCT In hich is ma	antunder 35 U.S. rica, listed below nternational appl aterial to patenta l'international filir	and, ins lication in ability as	sofar as the sub the manner pr defined in 37 C	bject matte rovided by t CFR 1.56 w	er of èa the first	ích of the cl t paragraph	daims of th	is applic C. 112, I	cation is	not disclosed vledge the dut	d in the prior ty to disclose
U.	.S. Par	ent Applicat		PCT Paren	t		rent Filir		T		nt Patent	
00/205 00		Numb	oer			_	MM/DD/Y				(if applica	ble)
09/205,80	9					Dec	ember 4	4, 1998				
		PCT internation						• •				
		hereby appoint the connected therew	vith:	ing registered p Customer Num OR Registered pra	nber			—		→┌	all business ir Place Cusi Number Bai Label he	tomer r Code
	Nam	16			tration mber			Nam	10		_	istration umber
Richard E. J	enkins			28,428	115.F.1		Jennifer I	L. Skord			30,687	
Jeffrey L. W	ilson			36,058			Gregory .	A, Hunt			41,085	
Arles A. Tay	/lor, Jr.			39,395			David P. (Gloekler			41,037	
X Additional	registere	d practitioner(s) r	named or	n supplemental	Registere	d Practi	tioner Infor	mation she	et PTO/	SB/02C	attached her	eto.
Direct all corr	esponde			ner Number Code Label				OR	X C	orrespo	ondence add	iress below
Name	Richa	ard E. Jenk	ins									
Address	Jenki	ns & Wilso	on, P.	Α								
Address	Suite	1400, Uni	versit	y Tower								
City	Durh	am				St	tate NO	Z	ZIP	2770)7	
Country	USA			Telephor	ne (919) 493	3-8000		Fax	(919) 419-03	83
believed to be punishable by	true; and fine or ir	Il statements ma d further that the mprisonment, or it issued thereon.	ese state r both, ur	ements were m	nade with t	the kno	wledge tha	at willful fal	lse state	ements a	and the like s	o made are
Name of So	ole or F	irst Invento	r:				A petition I	has been	filed for	rthis ur	nsigned inve	entor
Gi	iven Nan	ne (first and mid	dle [if a	ny])				Famil	ly Name	e or Su	mame	
David Mi	chael					Spi	rague					
Inventor's Signature		1 Day	Cn	Mich	hael	h	nagn	~•			Date	11/18/99
Residence: 0	Dity	Raleigh		State		V _c	7	USA			Citizenship	USA
PostOffice A	ddress	14209 All	ison I									
PostOffice A	ddress											
City		Raleigh	State	NC	ZIP	27	615		Cou	intry		
X Additional	linvento	ors are being na		nthe 1 su	pplement	tal Add	litional Inv	entor(s)s	heet(s)	PTO/S	B/02A attac	hed hereto



Please type a plus sign (+) inside this box →

PTO/SB/02A (3-97)

sign (+) inside this box \rightarrow + Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Addition	nal Joint Inventor, if ar	ıy:			A petitio	n has been fil	ed for th	nis unsig	ned in	ventor
Given Na	me (first and middle [if any	1)				Family Na	ame or	Surname		
Dan Alan				Bren	ides_	· · · · · · · · · · · · · · · · · · ·				
Inventor's Signature	Dan Alan Ba	enda	5				Date		11/18/99	
Residence: City	Raleigh	State	NC		Country	USA		Citizens	hip [JSA
Post Office Address	8620 Harps Mill Ro	oad								
Post Office Address							•			
City	Raleigh	State	NC		zip 2	7615	Countr	у		
Name of Addition	nal Joint Inventor, if an	ıy:			A petitio	n has been file	ed for th	nis unsig	ned inv	ventor
Given Na	me (first and middle [if any]	1)				Family Na	ame or	Surname		
Venkatarmaiah				R	avisha	ınkar		-		
Inventor's Signature	V. Rasse					•		N/l Da	8/99 te	
Residence: City	Apex	State	NC_		Country	USA		Citize	nship	USA
Post Office Address	102 Millers Creek	Drive								
Post Office Address										
City	Apex	State	NC		ZIP	27502	Cour	ntry		
Name of Addition	nal Joint Inventor, if an	ıy:			A petitio	n has been file	ed for th	is unsigi	ned inv	entor
Given Nar	me (first and middle [if any]])				Family Na	me or	Surname		
Paul Andrew	······································			Mille	er	<i>ş</i>				···
Inventor's Signature	Day A	ndreu	<u> </u>	M	the			11/19	199 10	
Residence: City	Raleigh	State	NC		Country	USA		Citize	nship	USA
Post Office Address	1008 Bentham Driv	vе								
Post Office Address						_				
City	Raleigh	State	NC		ZIP	27614	c	ountry		

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.





Please type a plus sign (+) inside this box →

PTO/SB/02C (3-97)

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

		(Supplemental Shoot)				
Name	Registration Number	Name	Registration Number			
. Erik Fako	45,522					

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

